

AMENDED IN SENATE AUGUST 22, 2006

AMENDED IN SENATE AUGUST 7, 2006

AMENDED IN ASSEMBLY MAY 26, 2006

AMENDED IN ASSEMBLY MAY 11, 2006

AMENDED IN ASSEMBLY MAY 8, 2006

AMENDED IN ASSEMBLY MAY 3, 2006

AMENDED IN ASSEMBLY APRIL 6, 2006

CALIFORNIA LEGISLATURE—2005–06 REGULAR SESSION

ASSEMBLY BILL

No. 2651

Introduced by Assembly Member Jones

February 24, 2006

An act to amend Sections 124116.5, 124118, 124118.5, and 124119 of the Health and Safety Code, relating to public health.

LEGISLATIVE COUNSEL’S DIGEST

AB 2651, as amended, Jones. Newborns: hearing screening.

The existing Newborn and Infant Hearing Screening, Tracking, and Intervention Act requires that every California Children’s Services (CCS)-approved general acute care hospital with licensed perinatal services offer all parents of a newborn, upon birth admission, a hearing screening test for the identification of hearing loss, using protocols approved by the State Department of Health Services or its designee.

This bill would, instead, require that this hearing screening be offered to every newborn, upon birth admission, ~~or in any event prior~~

to hospital discharge, by every general acute care hospital with licensed perinatal services, and would make related changes to the program. It would ~~permit~~ *require* certain hospitals *that have not been approved by the CCS program*, to contract for the provision of this service.

This bill would provide that its provisions shall become operative on January 1, 2008.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 124116.5 of the Health and Safety Code
2 is amended to read:
3 124116.5. (a) (1) Every general acute care hospital with
4 licensed perinatal services in this state shall administer to every
5 newborn, upon birth admission ~~or in any event prior to hospital~~
6 ~~discharge~~, a hearing screening test for the identification of
7 hearing loss, using protocols approved by the department or its
8 designee.
9 (2) In order to meet the department's certification criteria, a
10 general acute care hospital shall be responsible for developing a
11 screening program that provides competent hearing screening,
12 utilizes appropriate staff and equipment for administering the
13 testing, completes the testing prior to the newborn's discharge
14 from a newborn nursery unit, refers infants with abnormal
15 screening results, maintains and reports data as required by the
16 department, and provides physician and family-parent education.
17 (b) A hearing screening test provided for pursuant to
18 subdivision (a) shall be performed by a licensed physician,
19 licensed registered nurse, licensed audiologist, or an
20 appropriately trained individual who is supervised in the
21 performance of the test by a licensed health care professional.
22 (c) Every general acute care hospital *that has not been*
23 ~~approved by the California Children Services (CCS) program~~
24 *and* that has licensed perinatal services that provides care in less
25 than 100 births annually shall, if it does not directly provide a
26 hearing screening test, enter into an agreement with an outpatient
27 infant hearing screening provider certified by the department to
28 provide hearing screening tests.

(d) This section shall not apply to any newborn whose parent or guardian objects to the test on the grounds that the test is in violation of his or her beliefs.

SEC. 2. Section 124118 of the Health and Safety Code is amended to read:

124118. The department or its designee shall provide every general acute care hospital that has licensed perinatal services, or neonatal intensive care unit (NICU), as specified in Section 123975, written information on the current and most effective means available to screen the hearing of newborns and infants, and shall provide technical assistance and consultation to these hospitals in developing a system of screening each newborn and infant receiving care at the facility. The information shall also include the mechanism for referral of newborns and infants with abnormal test results.

SEC. 3. Section 124118.5 of the Health and Safety Code is amended to read:

124118.5. (a) The department shall establish a system of early hearing detection and intervention centers that shall provide technical assistance and consultation to hospitals in the startup and ongoing implementation of a facility *hearing* screening program and followup system.

(b) The early hearing detection and intervention centers shall be chosen by the department according to standards and criteria developed by the California Children's Services ~~Program (CCS)~~ *(CCS) program*. Each center shall be responsible for a separate geographic catchment area as determined by the program.

(c) Each center shall be required to develop a system that shall provide outreach and education to hospitals in its catchment area, approve hospitals on behalf of the department for participation as newborn hearing screening providers, maintain a database of all newborns and infants screened in the catchment area, ensure appropriate followup for newborns and infants with an abnormal ~~screen~~ *hearing screening*, including diagnostic evaluation and referral to intervention ~~service~~ *services* programs if the newborn or infant is found to have a hearing loss, and provide coordination with the CCS and local early intervention programs as defined in Title 14 (commencing with Section 95000) of the Government Code.

1 SEC. 4. Section 124119 of the Health and Safety Code is
2 amended to read:

3 124119. (a) The department shall develop and implement a
4 reporting and tracking system for newborns and infants tested for
5 hearing loss.

6 (b) The system shall provide the department with information
7 and data to effectively plan, establish, monitor, and evaluate the
8 Newborn and Infant Hearing Screening, Tracking and
9 Intervention Program, including the screening and followup
10 components, as well as the comprehensive system of services for
11 newborns and infants who are deaf or hard-of-hearing and their
12 families.

13 (c) Every general acute care hospital with licensed perinatal
14 services, or NICU in this state shall report to the department or
15 the department's designee information as specified by the
16 department to be included in the department's reporting and
17 tracking system.

18 (d) All providers of audiological followup and diagnostic
19 services provided under this article shall report to the department
20 or the department's designee information as specified by the
21 department to be included in the department's reporting and
22 tracking system.

23 (e) The information compiled and maintained in the tracking
24 system shall be kept confidential in accordance with Chapter 5
25 (commencing with Section 10850) of Part 1 of Division 9 of the
26 Welfare and Institutions Code, the Information Practices Act of
27 1977 (Chapter 1 (commencing with Section 1798) of Title 1.8 of
28 Part 4 of Division 3 of the Civil Code), and the applicable
29 requirements and provisions of Part C of the federal Individuals
30 with Disabilities Education Act (20 U.S.C. Sec. 1475 et seq.).

31 (f) Data collected by the tracking system obtained directly
32 from the medical records of the newborn or infant shall be for the
33 confidential use of the department and for the persons or public
34 or private entities that the department determines are necessary to
35 carry out the intent of the reporting and tracking system.

36 (g) A health facility, clinical laboratory, audiologist,
37 physician, registered nurse, or any other officer or employee of a
38 health facility or laboratory or employee of an audiologist or
39 physician, shall not be criminally or civilly liable for furnishing

1 information to the department or its designee pursuant to the
2 requirements of this section.
3 SEC. 5. Sections 1 to 4, inclusive, of this act shall become
4 operative on January 1, 2008.

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